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PTO/SB/03 (10-00)
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PLANT PATENT APPLICATION (35 U.S.C. 161) DECLARATION (37 CFR 1.63)	Attorney Docket Number	f1002 APP
	First Named Inventor	L. Pernille Olesen
	COMPLETE IF KNOWN	
	Application Number	/
	Filing Date	
	Group Art Unit	1661
<input checked="" type="checkbox"/> Declaration Submitted with Initial Filing	OR	<input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)
Examiner Name		

As a below named inventor, I hereby declare that:

My residence, mailing address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the new and distinct variety of:

Floribunda Rose Plant Named POULf1002

plant named:

which is claimed and for which a plant patent is sought, the specification of which

☒ is attached hereto OR ☐ was filed on (MM/DD/YYYY) as United States

Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claim, as amended by any amendment specifically referred to above.

I have asexually reproduced the plant to which this application applies.

☒ Said plant was found in a cultivated area (check this box for newly found plant only)

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the National or PCT International filing date of the continuation-in-part.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Check Only If Priority Not Claimed	Certified Copy Attached?	
				YES	NO
- none -			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

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DECLARATION – Plant Patent Application

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

Direct all correspondence to: ☐ Customer Number or Bar Code LabelOR ☒ Correspondence address below**Name** Poulsen Roser A/S**Address** 620 South Front Street**Address****City** Central Point**OR****ZIP** 97502**State****Country** USA**Telephone** (541) 245-8050**Fax** (541) 665-2252

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:☐ A petition has been filed for this unsigned inventor**Given Name** L. Pernille**Family Name or Surname** Olesen**Inventor's Signature****Date** 10 OCT 2003**Residence: City** Fredensborg**State****Country** Denmark**Citizenship** Danish**Mailing Address** Kratbjerg 332**Mailing Address****City** Fredensborg**State****Zip** DK-3480**Country** Denmark**NAME OF SECOND INVENTOR:**☐ A petition has been filed for this unsigned inventor**Given Name** Mogens N.**Family Name or Surname** Olesen**Inventor's Signature****Date** 10 OCT 2003**Residence: City** Fredensborg**State****Country** Denmark**Citizenship** Danish**Mailing Address** Kratbjerg 332**Mailing Address****City** Fredensborg**State****Zip** DK-3480**Country** Denmark☐ Additional inventors are being named on the ___ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.